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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Pocket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY	
			NUMBER FILED		BER EXTRA	RATE	FEE	:	RATE	FEE
	SIC FEE CFR 1.16(a))		•	• • • •			\$	OR		5
	TAL CLAIMS CFR 1.16(c))		minus 20 =			X \$ =		OR ·	X \$ =	
	INDEPENDENT CLAIMS (37 CFR 1.16(b))		minus 3 = •			x \$ =	<del>  .                                     </del>			<del>                                     </del>
MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					<del>                                     </del>	· · OR	X \$=		
						= =	-	OR·	<u> + \$ _ = </u>	···
* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL		OR-	JATOT	
CLAIMS AS AMENDED - PART II										
4				(Column 3)	SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY		
AMENDMENT		CLAIMS REMAININ AFTER AMENOMEI	- I	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEEN		RATE	ADDI- TIONAL EEE
	Total (37 CFR 1.16(c))	2	Minus	2	<u> </u>	x \$ =		OR	x s =	1
	Independent (37 CFR 1,16(b))	3	Minus	3		x s =		-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			ENT CLAIM (37 CI	FR 1 16(d))	+5 =		OR	=	
								OR	+s_ =	·
						ADD'L FEE		OR	ADD'L FEE	
		(Column 1) CLAIMS	•	(Column 2)	(Column 3)		·	1		<u> </u>
AMENDMENT	•	REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL* FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1,16(c))		Minus	••	=	× \$=		OR	X \$_ =.	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	X \$ . =		OR	x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR ) (Sign)					+ 5 =		OR.		
			· · · · · · · · · · · · · · · · · · ·			TOTAL ADO'L FEE		OR	+ s = TOTAL ADD'L FEE	
•		(Column 1)		(Column 2)	(Column 3)				•	
AMENDMENT		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TADNAL FEE		RATE	ADDI-
	Total (37 CFR 1.16(c))	•	Minus	••	=	x s =				FEE
	Independent (37 CFR 1 16(b))	•	Minus	444	=			OR .	× \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					+ s =	·	OR	× s=	
	CONTRACTOR (37 CFR   10(0))							OR [	+ s =	
,	If the entry in co	olumn tisless	than the ento	in column 2 west	e "O" in column 3	TOTAL ADD'L FEE		OR .	ADO'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".										

"If the "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.